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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form IC — Identification and Certification

Instructions for this form found on pages 6 - 12.
This form must be completed for the location shown on the above label. If you need additional forms for other locations, call IEPA.

RECEIVED
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IEPA/DLPC

Sec. I – Generator Status

A. 1 RCRA Generator Status *(Enter one code)*
30

1 = LQG
2 = SQG } Skip to Box C
3 = CESQG
4 = Nongenerator (Continue to Box B)

B. Reason for not generating *(Check all that apply)*

31 __ Never generated
32 __ Out of business
33 __ Only excluded or delisted waste generated
34 __ Only non-hazardous waste generated
35 __ Periodic generator, none in reporting year
36 __ Waste minimization activity
37 __ Other *(Specify in comments box)*

C. 1 (38) Status Time Period: 1 = Expected to be the same next year and following years. 2 = Expected to change next year.

Section II. Enter the SIC Code(s) for this location.

3341 (39) 3351 (43) 3366 (47) _____ (51)

Section III. On-Site Waste Management Status *(enter one code for each question)*

A. 55 1 RCRA regulated (permitted or interim status) storage
B. 56 1 RCRA permitted or interim status treatment, disposal, or recycling
C. 57 1 RCRA exempt treatment, disposal, or recycling

Section IV. Waste minimization activity during this reporting year *(Enter Y [Yes] or N [No] for questions A-D)*

A. 58 Y Did this site begin or expand a **source reduction** activity this year? If no, list factors in D first column.
B. 59 N Did this site begin or expand a **recycling** activity this year? If no, list factors in D second column.
C. 60 Y Did this site systematically investigate opportunities for **source reduction or recycling**?
D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional **source reduction** or on-site or off-site **recycling** activities this year; if yes, enter Y below.

S. Reduc.	Recyc.	
61 __	71 __	Insufficient capital to install new source reduction equipment or implement new source reduction practices
62 __	72 __	Lack of technical information on techniques applicable to the specific production processes
63 __	73 __	Not ecomomically feasible: cost savings in waste management or production will not recover the capital investment
64 Y	74 Y	Concern that product quality may decline as a result
65 __	75 __	Permitting burdens
66 __	76 __	Previously implemented -- additional reduction/recycling does not appear to be technically feasible
67 __	77 __	Previously implemented -- additional reduction/recycling does not appear to be economically feasible
68 __	78 __	Previously implemented -- additional reduction/recycling does not appear to be feasible due to permitting requirements
69 __		Technical limitations of the production processes
	79 __	Requirements to manifest wastes inhibit shipments off site for recycling
	80 __	Financial liability provisions inhibit shipments off site for recycling
	81 __	Technical limitations of production processes inhibit shipments off site for recycling
	82 __	Technical limitations of production processes inhibit off-site recycling
	83 __	Lack of permitted off-site recycling facilities
	84 __	Unable to identify a market for recyclable materials
70 __	85 __	Other *(Specify in Comments box)*

Sec. V. This Agency is authorized to require this information under Revised Statutes, 1981, Chapter III-1/2, Sections 1004 and 1021 (f)(2). Disclosure of this information is required. Failure to do may result in a civil penalty up to $25,000 for each day the failure continues, a fine up to $1,000,000.00 and imprisonment up to 5 years. This form has been approved by the Forms Management

CERTIFICATION I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. Please print: Last Name Conreaux First Name Robert B. Title V. P.-Manufacturing

C. Signature Robert E. Conreaux D. Date of signature 2/23/93

COMMENTS: ____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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Prepared: [illegible] 2/19/93 Checked: [illegible] 2/19/93

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: Solvent Still Bottoms Sludge, 1, 1,1 - Trichloroethane

B. EPA Hazardous Waste Code F 0 0 2 (30) (34) (38) (42) (46)

C. SIC code 2 3 5 1 (50)

D. Origin Code 5 (54) System type M 0 2 1 (56) E. Source code A 1 9 (60) A (64) A (68)

F. Point of measurement 1 (69) G. Waste form code B 6 0 1 (70)

H. Radioactive mixed 2 (73) I. TRI constituent 3 (74)

J. CAS numbers: 1. (75) 7 1 - 5 5 - 6 2. (83) - - 3. (91) - -

4. (99) - - 5. (107) - -

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 (115) Density (116) 8 . 3 7 lbs/gal *(Same unit and density must be used for all quantities on this page)*

Quantity generated in : B Previous reporting year (120) 1 6 5 0 0 . C. Current reporting year (130) 1 1 0 0 0

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N (140) Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M (141) Quantity managed on-site this year (145) .

On-Site System 2: System Type M (156) Quantity managed on-site this year (159) .

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y (169) Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility:

Clayton Chemical Co.
1 Mobile AVe., Sauget, IL 62201

B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 6 6 9 1 8 3 2 7 (170)

C. System type shipped to M 0 2 1 (182) D. Off-site availability code / (186)

E. Total quantity shipped in this reporting year: (187) 1 1 0 0 . 0

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: (197)

C. System type shipped to M (209) D. Off-site availability code (213)

E. Total quantity shipped in this reporting year: (214) .

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N (224) Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W (225) W (228) W (231) W (234) C. Other effects (Y=Yes, N=No) (237)

D. Quantity recycled in reporting year due to new activities (238) .

E. Activity/production index (248) . F. Reporting year Source reduction quantity (251) .

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N (261)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N (262)

Quantity stored at year end and for 90 days or more that was generated this reporting year: (263) .

Quantity stored at year end that was generated prior to this reporting year: (273) .

COMMENTS: (299) Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

9 4 1 6 0 0 0 2 0 3 0

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: Waste Flammable Liquid (Aliphatic and Aromatic Hydrocarbons)
B. EPA Hazardous Waste Code D001 (30) ____ (34) ____ (38) ____ (42) ____ (46) ____
C. SIC code 3351 (50)
D. Origin Code 1 (54) System type M (55) ____ E. Source code 2A58 (60) A ____ (64) A ____ (68)
F. Point of measurement 1 (68) G. Waste form code B219 (69)
H. Radioactive mixed 2 (73) I. TRI constituent 2 (74)
J. CAS numbers: 1. (75) ____ 2. (83) ____ 3. (91) ____
4. (99) ____ 5. (107) ____

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 (115) Density 9.5 (116) lbs/gal *(Same unit and density must be used for all quantities on this page)*
Quantity generated in : B Previous reporting year (120) 8250. C. Current reporting year (130) 55.0
D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N (140) Y= Yes (Continue to System 1) N= No (Skip to Sec. III)
On-Site System 1: System Type M (141) ____ Quantity managed on-site this year (145) ____
On-Site System 2: System Type M (156) ____ Quantity managed on-site this year (159) ____

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y (165) Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)
Site 1: Name and address of facility:
Safety-Kleen Corp.
633 East 138th St. Dolton, IL 60419
B. U.S. EPA ID No. of facility waste was shipped to: ILD980613913 (170)
C. System type shipped to M061 (182) D. Off-site availability code 1 (186)
E. Total quantity shipped in this reporting year: 55.0 (187)
Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: ____ (197)
C. System type shipped to M ____ (209) D. Off-site availability code ____ (213)
E. Total quantity shipped in this reporting year: ____ (214)

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N (224) Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)
B. Activity W ____ (225) W ____ (228) W ____ (231) W ____ (234) C. Other effects (Y=Yes, N=No) ____ (237)
D. Quantity recycled in reporting year due to new activities ____ (238)
E. Activity/production index ____ (248) F. Reporting year Source reduction quantity ____ (251)

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N (261)
B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N (262)
Quantity stored at year end and for 90 days or more that was generated this reporting year: ____ (263)
Quantity stored at year end that was generated prior to this reporting year: ____ (275)

COMMENTS: Y (289) Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

1992 HAZARDOUS WASTE REPORT

FORM GM - WASTE GENERATION AND MANAGEMENT

COMMENTS

SECTION I - ITEM G

WASTE FORM CODE B219 - MATERIAL WAS OUT-DATED ROOFING COMPOUND OR TAR

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: Waste Cleaning Solution, Stripper Dip Mix

B. EPA Hazardous Waste Code D001 (30) (34) (38) (42) (46)

C. SIC code 3341 (50)

D. Origin Code 1 (54) System type M (55) E. Source code A22 (59) A (62) A (66)

F. Point of measurement 1 (68) G. Waste form code B102 (69)

H. Radioactive mixed 2 (73) I. TRI constituent 2 (74)

J. CAS numbers: 1. (75) 2. (83) 3. (91)

4. (99) 5. (107)

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 (115) Density 8.30 (116) lbs/gal *(Same unit and density must be used for all quantities on this page)*

Quantity generated in : B Previous reporting year (120) 9101. C. Current reporting year (130) 8801.

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N (140) Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M (141) Quantity managed on-site this year (145)

On-Site System 2: System Type M (155) Quantity managed on-site this year (159)

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y (169) Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility:

Safety Kleen Envirosystems
State Highway 146, New Castle, KY 40050

B. U.S. EPA ID No. of facility waste was shipped to: KYD053348108 (170)

C. System type shipped to M061 (182) D. Off-site availability code 1 (186)

E. Total quantity shipped in this reporting year: 8801. (187)

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: (197)

C. System type shipped to M (209) D. Off-site availability code (213)

E. Total quantity shipped in this reporting year: (214)

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? Y (224) Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W54 (225) W (226) W (231) W (234) C. Other effects (Y=Yes, N=No) N (237)

D. Quantity recycled in reporting year due to new activities 0. (238)

E. Activity/production index 1.3 (248) F. Reporting year Source reduction quantity 3640.4 (251)

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N (261)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N (262)

Quantity stored at year end and for 90 days or more that was generated this reporting year: (263)

Quantity stored at year end that was generated prior to this reporting year: (275)

COMMENTS: (304) Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: Waste Cleaning Solution, Phosphoric Acid

B. EPA Hazardous Waste Code D002

C. SIC code 3341

D. Origin Code 1 System type M

E. Source code A37 A A

F. Point of measurement 1

G. Waste form code B103

H. Radioactive mixed 2

I. TRI constituent 3

J. CAS numbers: 1. 7664-38-2 2. 3. 4. 5.

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 10.5 lbs/gal *(Same unit and density must be used for all quantities on this page)*

Quantity generated in : B Previous reporting year 990.0 C. Current reporting year 1045.0

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M Quantity managed on-site this year

On-Site System 2: System Type M Quantity managed on-site this year

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility:
Heritage Environmental Services, Inc.
7901 W. Morris St., Indianapolis, IN 46231

B. U.S. EPA ID No. of facility waste was shipped to: IND093219012

C. System type shipped to M078 D. Off-site availability code 1

E. Total quantity shipped in this reporting year: 1045.0

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to:

C. System type shipped to M D. Off-site availability code

E. Total quantity shipped in this reporting year:

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W W W W C. Other effects (Y=Yes, N=No)

D. Quantity recycled in reporting year due to new activities

E. Activity/production index F. Reporting year Source reduction quantity

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N

Quantity stored at year end and for 90 days or more that was generated this reporting year:

Quantity stored at year end that was generated prior to this reporting year:

COMMENTS: Y Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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3 2000

Sec. III C System Type Shipped to: M078

Handling codes as given in 40CFR
Part 265 Appendix I

Storage: S01 - Container (barrel, drum, etc.)

Treatment: T23 - Chemical Precipitation
T31 - Nuetralization
T40 - Filtration
T37 - Coagulation
T21 - Chemical Fixation

Disposal: D85 - Other (not specified)

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: Waste Oil, Halogen Contaminated

B. EPA Hazardous Waste Code F001 D001 D005 D008 ____

C. SIC code 3351

D. Origin Code 1 System type M____

E. Source code A51 A53 A54

F. Point of measurement 2

G. Waste form code B206

H. Radioactive mixed 2

I. TRI constituent 3

J. CAS numbers: 1. 71-55-6 2. ____ 3. ____ 4. ____ 5. ____

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 Density 7.86 lbs/gal *(Same unit and density must be used for all quantities on this page)*

Quantity generated in: B Previous reporting year 497650.0 C. Current reporting year 424380

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M____ Quantity managed on-site this year ____.__

On-Site System 2: System Type M____ Quantity managed on-site this year ____.__

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility:
Holnam/Safety Kleen
P. O. Box 456, Clarksville, MO 63336

B. U.S. EPA ID No. of facility waste was shipped to: MOD029729688

C. System type shipped to M051

D. Off-site availability code 1

E. Total quantity shipped in this reporting year: 42438.__

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: ____

C. System type shipped to M____

D. Off-site availability code ____

E. Total quantity shipped in this reporting year: ____.__

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? Y Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W12 W__ W__ W__

C. Other effects (Y=Yes, N=No) ____

D. Quantity recycled in reporting year due to new activities N/A.__

E. Activity/production index N/A.__

F. Reporting year Source reduction quantity 7327.__

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N

Quantity stored at year end and for 90 days or more that was generated this reporting year: ____.__

Quantity stored at year end that was generated prior to this reporting year: ____.__

COMMENTS: ____ Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: WASTE SOLVENT; 1, 1, 1 - Trichloroethane

B. EPA Hazardous Waste Code F001 (30)

C. SIC code 3351 (80)

D. Origin Code 1 (84) System type M (85)

E. Source code A19 (88) A (92) A (96)

F. Point of measurement 1 (98)

G. Waste form code B202 (99)

H. Radioactive mixed 2 (75)

I. TRI constituent 3 (74)

J. CAS numbers: 1. 71-55-6 (75) 2. (83) 3. (91)
4. (99) 5. (107)

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

UOM 1 (115) Density 8.72 (116) lbs/gal *(Same unit and density must be used for all quantities on this page)*

Quantity generated in : B Previous reporting year (120) 797900. C. Current reporting year (130) 896850

D. Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? Y (139) Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M021 (141) Quantity managed on-site this year (145) 89685.0

On-Site System 2: System Type M (156) Quantity managed on-site this year (159)

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y (166) Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility:
Clayton Chemical Co.
1 Mobile Ave., Sauget, IL 62201

B. U.S. EPA ID No. of facility waste was shipped to: ILD066918327 (170)

C. System type shipped to M021 (182) D. Off-site availability code 1 (186)

E. Total quantity shipped in this reporting year: 5788 (187)

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: (197)

C. System type shipped to M (209) D. Off-site availability code (213)

E. Total quantity shipped in this reporting year: (214)

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? N (224) Y= Yes (Cont. to Box B) N= No (Cont. to Sec. V)

B. Activity W (225) W (228) W (231) W (234) C. Other effects (Y=Yes, N=No) (237)

D. Quantity recycled in reporting year due to new activities (238)

E. Activity/production index (248) F. Reporting year Source reduction quantity (251)

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N (262)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N (262)

Quantity stored at year end and for 90 days or more that was generated this reporting year: (263)

Quantity stored at year end that was generated prior to this reporting year: (275)

COMMENTS: (Enter Y (Yes) if you have comments regarding this page and attach extra sheet.)

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form GM – Waste Generation and Management

Instructions for this form found on pages 13 - 30.

Sec. I WASTE DESCRIPTION

A. Waste Description: Solvent Still Bottoms, 1,1,1-Trichloroethane

B. EPA Hazardous Waste Code F 0 0 2 (30) (34) (38) (42) (46)

C. SIC code 3 3 5 1 (50)

D. Origin Code (54) System type M 0 2 1 (56) E. Source code A 1 9 (60) A (62) A (65)

F. Point of measurement 1 (66) G. Waste form code B 2 0 1 (69)

H. Radioactive mixed 2 (73) I. TRI constituent 3 (74)

J. CAS numbers: 1. (75) 7 1 - 5 5 - 6 2. (83) 3. (91)

4. (99) 5. (107)

Sec. II QUANTITY GENERATED AND MANAGED ON-SITE

A. UOM 1 (115) Density (116) 7.90 lbs/gal *(Same unit and density must be used for all quantities on this page)*

Quantity generated in : B Previous reporting year (120) 5 4 2 5. C. Current reporting year (130) 4 5 6 3

Did this location do any of the following to this waste (at this location): manage in exempt or regulated treatment, recycling, or disposal process? N (120) Y= Yes (Continue to System 1) N= No (Skip to Sec. III)

On-Site System 1: System Type M (141) Quantity managed on-site this year (145)

On-Site System 2: System Type M (156) Quantity managed on-site this year (159)

Sec. III OFF-SITE SHIPMENT

A. Was any of this waste shipped off site this reporting year? Y (169) Y= Yes (Continue to Box B) N= No (Skip to Sec. IV)

Site 1: Name and address of facility:

Clayton Chemical Co.
1 Mobile Ave., Sauget, IL 62201

B. U.S. EPA ID No. of facility waste was shipped to: I L D 0 6 6 9 1 8 3 2 7 (170)

C. System type shipped to M 0 2 1 (182) D. Off-site availability code 1 (186)

E. Total quantity shipped in this reporting year: 4 5 6 3. (187)

Site 2: Name and address of facility:

B. U.S. EPA ID No. of facility waste was shipped to: (197)

C. System type shipped to M (209) D. Off-site availability code (213)

E. Total quantity shipped in this reporting year: (214)

Sec. IV NEW WASTE MINIMIZATION ACTIVITIES

A. Did new activities in this year result in minimization of this waste? Y (224) Y= Yes (Cont. to Box B) N= No (Cont. to Sec V)

B. Activity W (225) W (228) W (231) W (234) C. Other effects (Y=Yes, N=No) N (237)

D. Quantity recycled in reporting year due to new activities (238)

E. Activity/production index (248) F. Reporting year Source reduction quantity (251) 8 6 2.

Sec. V REGULATED STORAGE

A. Did this site store RCRA wastes 90 days or more and then ship it off-site (to site shown in Section III)? (Y=Yes, N=No) N (261)

B. Did this site store RCRA wastes on-site for more than 90 days but waste is in storage at year end: (Y= Yes, N= No) N (262)

Quantity stored at year end and for 90 days or more that was generated this reporting year: (263)

Quantity stored at year end that was generated prior to this reporting year: (273)

COMMENTS: (999) Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

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ILLINOIS Environmental Protection Agency
1992 Hazardous Waste Report
Form T—Transporter Identification

Instructions for this form found on page 31.

1. U.S. EPA ID No. M O D 0 3 1 1 0 2 0 2 3 (35)
Transporter Name and Address:
Superior Equipment Co.
3283 Ivanhoe
St. Louis, MO 63139

2. U.S. EPA ID No. I L D 0 5 3 9 8 0 2 7 2 (42)
Transporter Name and Address:
Mid-West Sanitary Service
P. O. Box 83
Wood River, IL 62095

3. U.S. EPA ID No. M O D 0 0 6 4 9 1 2 8 6 (49)
Transporter Name and Address:
Commercial Cartage Company
343 Axminister Dr.
Fenton, MO 63026

4. U.S. EPA ID No. I L D 0 0 6 4 9 3 1 9 1 (56)
Transporter Name and Address:
Schiber Truck Co.
P. O. Box 51
Hartford, IL 62048

5. U.S. EPA ID No. I L D 0 6 6 9 1 8 3 2 7 (63)
Transporter Name and Address:
Clayton Chemical Co.
#1 Mobile Ave.
Sauget, IL 62202

6. U.S. EPA ID No. I N D 0 5 8 4 8 4 1 1 4 (70)
Transporter Name and Address:
Heritage Transport Inc.
7901 W. MOrris St.
Indianapolis, IN 46231

7. U.S. EPA ID No. W I D 9 8 0 9 0 4 7 4 2 (77)
Transporter Name and Address:
Schneider Tank Lines
P. O. Box 2356
Green Bay, WI 54306

8. U.S. EPA ID No. (84)
Transporter Name and Address:

COMMENTS: (126) Enter Y (Yes) if you have comments regarding this page and attach extra sheet.

CERRO COPPER PRODUCTS CO.
P.O. Box 66800
St. Louis, MO 63166-6800
618/337-6000

February 19, 1993

Illinois Environmental Protection Agency
Division of Land Pollution Control #24
P.O. Box 19276
Springfield, Illinois 62794-9276

RE: 1992 Generator Annual Hazardous Waste Report
U.S.E.P.A. I.D. NO. ILD080018914,
I.E.P.A. I.D. NO. 1631210008

Gentlemen:

Enclosed is the completed 1992 GENERATOR ANNUAL HAZARDOUS WASTE REPORT for Cerro Copper Products Co. Should additional information or clarification be required, please contact my office or that of Joe D. Burroughs, Environmental Engineer.

Very truly yours,

CERRO COPPER PRODUCTS CO.

Joseph M. Grana
Manager of Environmental and Energy Affairs

Enclosure

RECEIVED
FEB 26 1993
IEPA/DLPC